

Acknowledgments of Recent Significant Donations:

- \$1,160,000: Estate of Dorothy D. Peterson, Ryther League 4 & 20 Circle Legacy member of the Lillian Johnson Society
- From the Ryther League: \$79,600 in unrestricted funds & \$4,683 for the kids' bed rooms
- \$98,804: Lynn & Michael Garvey for the multipurpose therapy room & \$5,000 at Ryther's luncheon
- \$20,000: The Seattle Foundation for general operations
- \$14,736 through United Way of King County including Anonymous, \$10,000 & Capital Industries, \$1,000
- \$12,000: John Spencer Bradley Foundation
- \$10,000: The Foster Foundation for Sub-Acute Care; Jean K. Lafromboise Foundation
- \$8,000: Randy Miller*
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- \$3,000: Daniel Brewer & Marne Sannes; Foss Family Foundation; & Sterling Realty Organization
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- \$2,000: Robert & Libby Stack
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- \$1,000: Howard & Robbie Anderson; Howard & Lynn Behar; Bishop Fleet Foundation; Equinox Properties Corporation; Dorrie & Bill Ford through Washington Women's Foundation; Barbara & Ed Fruhling*; Lee Grogg*; Kevin & Ann Harrang; Susan Hyde MD & Gary Crowell; Jacobi Family Foundation; Annmarie & Bob Kelly; Mary & Peter Kerr; Craig Kinzer; Ramola Lewis & Lynn Booth; Scott & Julie Lynch; Paul S. Nadler Family Charitable Trust designated for Substance Abuse Treatment; Richard Noffsinger; Valerie Robinson; James & Suesanne Seather; Coleen Spratt*; Dina Stark*; & DJ Wilson

* 2012 Luncheon Pledge

Thank you to our in-kind donors:

Solutions IQ for office furniture, technology & supplies; Architecture for Humanity for cottage design services; Pacific Office Automation for a printer; Timeline Media Services for video production; Wizard Enterprises Construction & Design for plumbing, electrical & sound work for multipurpose therapy room

www.ryther.org

Psychological Evaluations: Some basics for parents and caregivers

Interview with Ryther Psychologist, Dr. Rochelle Coffey, PsyD



What types of psychological assessments do you most frequently do?

Most often we do assessments for the purpose of diagnostic clarification and recommendations for treatment. This may include questions about whether a child has ADHD, post-traumatic stress disorder, autism spectrum disorder, a learning disability, depression, anxiety or other psychological disorders.

How is the decision made as to which type would be most beneficial?

We determine which tests to administer based on the question the parent or referring professional is asking about the child. If in the course of the assessment other questions arise we discuss that with the parent to determine whether additional assessment is desired.

Why would parents consider having their child tested?

Simply put, an evaluation is an investigation to answer questions. When parents have concerns about their child's behavior in school, with friends, or in the home, they may consult their child's teacher or pediatrician, a therapist or others. If subsequent interventions do not resolve concerns, parents may request an assessment to provide further information. Is the high activity ADHD, anxiety or opposition? Are the learning problems due to a developmental disability, inattention, or a specific learning disability? Is the delay in language development and socialization indicative of an autism spectrum disorder? Is a child underperforming in school because the material is too difficult for them or because they are not being challenged? Our psychologists can help you determine whether an evaluation might be helpful.

What should parents and caregivers expect during and after an assessment at Ryther?

Initially, the psychologist will meet with parents or caregivers to determine whether their questions or concerns may be addressed with an evaluation. She will attain a thorough description of their concerns as well as a developmental history. If an evaluation is appropriate, she will discuss what types of assessments will be used and who will need to provide further information. Releases to speak with teachers, coaches or other caregivers may be sought or the parent may be asked to deliver standardized questionnaires for these people. After that an appointment will be scheduled for the child to come in for the assessment. This is typically done in two sessions depending on the child's age and the number of tests to be administered. With only rare exception, the assessment must be completed without parental presence. After the assessment, a report will be prepared and the caregivers will return for a feedback session. The report will include recommendations for various domains including academics, home, and community.

Do we have any specialized assessments that go beyond general psychological evaluations?

At Ryther we have the ability to do a broad range of evaluations. We use cognitive, academic achievement, objective and projective personality tests as well as neuropsychological instruments. We also do autism spectrum disorder assessments, which in addition to those tools mentioned above, includes the Autism Diagnostic Observation Schedule II, specialized structured interviews, as well as parent, teacher and child reports.

Call Ryther at 206.517.0234 for information or to make an appointment.

Healthy Children. Stronger Families.

■ From the Executive Director

We have just closed the books on 2012, and I am happy to paraphrase one of the memorable lines from the movie *The Big Lebowski* in reporting on Ryther's progress: "**Ryther Abides.**" Actually, Ryther is thriving and growing because it has defied oversimplified categorization by many people in the Child Welfare field. Ryther has adapted to a changed world by offering more intensive and high quality services to more acutely disturbed children and teens. Ryther has found an underserved market in the private arena that can help sustain its traditional mission with the State's terribly abused, neglected and traumatized children. Ryther has developed and implemented innovative programs and best practices serving kids from the autism spectrum to chemically dependent and mentally ill adolescents. This process continues unabated. Ryther is now providing groups using skills from an evidence-based practice called Dialectical Behavioral Therapy (DBT) and will soon open a new intensive outpatient treatment program for chemically dependent teenagers that is fundamentally

different (and we think more effective) from past models. Ryther has continued to attract and will add child psychiatrists thus bringing a rare specialty to more children and families by serving primary care pediatric practices effectively and responsively. Ryther is also working closely with school counselors as our therapists guide troubled children and teens in the school setting. All this has occurred as we have continued to improve our metrics in our care for the abused and neglected younger children that Ryther has been famous for serving well.

Thanks to all of you who have kept your faith in Ryther. Thanks also to all of you who are new friends of Ryther for joining the cause. To all of you who look at this page, The Best is Yet to Come!



Lee E. Grogg: Executive Director/CEO

■ "Ned's" Story: Very Young, Very Addicted.



"Ned" was 13 when he came to Ryther's Cottage B Inpatient Chemical Dependency program for teen boys facing addiction and, often, a co-occurring mental health issue. He had been introduced to meth at a very young age and admitted to resorting to drinking gasoline to get high. Ned had stopped attending school and was frequently violent at home. Consequently, he was facing multiple criminal charges – much of it stemming from his explosive anger brought on by using spice.*

Ned came to Ryther through the juvenile court system and was diagnosed and treated for depression by one of Ryther's psychiatrists, Dr. Linda Ford. He was also evaluated by Dr. Rochelle Coffey, Ryther's psychologist. Test results from Dr. Coffey showed he had high intelligence and that he was able to grasp complex concepts despite his age. Knowing this led to effectively employing evidence-based cognitive behavioral therapy (CBT). Ned responded well to the critical thinking challenges of CBT with daily treatment homework that included writing down feelings and tracing them back to

thoughts, which oftentimes were maladaptive. Other goals were to increase distress tolerance so he could learn to control his anger. Ned participated in group sessions, our educational program as well as experiential activities, including those on our Challenge Course, where new skills get tested in safe but tangible ways.

Family therapy made a difference in his progress and was incorporated whenever possible. Ned owned up to his past actions and started to communicate in a healthier way. When he left Ryther after 30 days, he transitioned to a recovery house. He calls frequently to let us know that he is doing well. He expressed that Ryther was where he felt safe and cared for by staff all the time. At graduation, he knew it was time to leave the cottage. Although his addiction was at the same level as someone struggling for many years, he now has some real skills and the structure to stay on a positive trajectory in his life.

* "Spice" poses significant health risks and is easily available in head shops and online. It contains herbal mixtures producing similar effects to marijuana and is marketed as a "safe," legal alternative. The dried, shredded plant material and chemical additives are responsible for the psychoactive effects. There is high abuse likelihood. (Source: www.drugabuse.gov/publications/drugfacts/spice-synthetic-marijuana).

Announcing 2013 open enrollment at **Aspiring Youth Summer Camps** for campers ages 8 and up. Camps provide an exciting choice of activities, from video production to habitat restoration to art. Some campers are shy, some are quirky and some are twice exceptional. Some of our campers have a diagnosis of Asperger's Syndrome, ADHD, learning disabilities or other similar traits. To enroll or for information, visit AspiringYouth.net or call 206.517.0241.



League Unit Beta Theta Pi members of UW volunteer on Ryther's campus.

Ryther News

League

The League's successful December fundraisers included the annual poinsettia sale, Noel's Holiday Luncheon and the all-League Holiday Luncheon, where Ryther received its semiannual donation of \$79,600. The League also provides opportunities like the Marion Baer Holiday Store where children "buy" gifts for those most important to them. For teens in Cottage B working to overcome addiction, UW Beta Theta Pi members (the youngest League Unit) visit to give them an idea of college life and hope for their future. Call 206.517.0215 for information about joining the League.

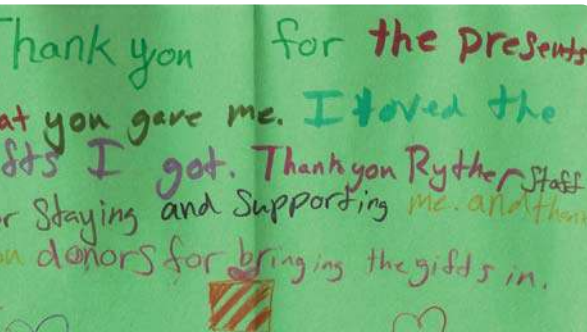
■ Dasia Finds Her Voice and an Adoptive Forever Family.

As the oldest of five Dasia made sure her younger siblings were fed. Removed from her family due to neglect and abuse, she lost her beloved siblings and the only family she had known. As promises by foster families to be "loved" and live with them "forever" didn't materialize, Dasia retreated deeper into herself. That's when she came to Ryther at age seven. Dasia displayed behaviors relating to anxiety and depression, with difficulty expressing her feelings. After working with Ryther's team around grief and loss, she was ready to live with a family. Lisa, her adoptive mother, had worked in Cottage D and recalls, "It was probably the hardest job, but also my favorite." She and her husband Michael were thinking

of doing respite care, but when they met Dasia they knew it was going to be longer term. Dasia remarked: "When I realized my mom worked with Ryther and that she was a counselor, I felt like she would be a good mom because she understands more and is able to talk to people and would be easier to talk to." Lisa, Michael and Dasia became part of Ryther's Therapeutic Family Care program, with help 24/7. There was discussion about roles moms and dads play in helping kids. Dasia learned what she was responsible for and what she didn't have to worry about.

She reflected: "I learned a lot and I'm successful in school, in sports, and I'm able to make a lot of friends." See Dasia's video at ryther.org/ foster-parent.

To learn about Ryther's Therapeutic Family Care Program, contact Heather Perry at 206.517.0273 ext. 11 or email heatherp@ryther.org.



■ Sincere thanks to those who made Thanksgiving and the Holidays very special.

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Appt. Hours & Bellevue office

Seattle: 8am - 7pm Mon. - Thurs., Fri. until 5pm

Our Bellevue office at 14715 Bel-Red Road, Building G, Suite 100, Bellevue, WA 98007 with availability for evening and weekend appointments is now accepting new clients.

Masthead photograph of mosaic was taken by a teen boy in Cottage B, Ryther's Chemical Dependency Inpatient Program, as part of its educational component taught through the lens of art.

Ryther Voice

Winter 2013

■ With Gratitude to our 2012 Luncheon Sponsors, Thank You for Putting Children First!

Jacque & Michael Casey



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Save the date

It's the Business of Caring: **Ryther Annual Luncheon 2013** with keynote speaker Maud Daudon, President & CEO of the Seattle Chamber of Commerce. Thursday, November 14, 2013 at the Grand Hyatt Seattle. To sponsor or host a table, contact Ryther at 206.517.0215.

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